FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB	APPR	OVA
91112	, w	

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response . . . 1.00

SEC USE ONLY							
Prefix		Serial					
	DATE RE	CEIVED					
	1						

Name of Offering KSA Capital Fund, Ltd. (th		is an amendment	and name has char	ged, and indicate c	hange.)	
Filing Under (Check box(es)	that apply):	☐ Rule 504	☐ Rule 505	X Rule 506	☐ Section 4(6)	□ ULOE
Type of Filing:	■ New Filing	□ Ar	mendment			
		A. BAS	SIC IDENTIFICATIO	N DATA		
Enter the information reques	sted about the iss	uer	1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00	3.3300		
Name of Issuer KSA Capital Fund, Ltd.	(□ check	if this is an amend	lment and name has	changed, and indic	cate change.)	04038312
Address of Executive Office c/o KSA Capital Managem Morristown, New Jersey C	ent, LLC, 89 Hea		y, State, Zip Code) , North Tower, 3rd		ephone Number (Inc 3) 401-6402	luding Area Code)
Address of Principal Busines (if different from Executive C			City, State, Zip Cod		ephone Number (Inc ne as above	luding Area Code)
Brief Description of Busines. To invest primarily in the		nies in basic indu	stries utilizing a va	lue oriented inves	tment approach.	PROCESSED
Type of Business Organizat  ☐ corporation	ion		irtnership, already fo	rmed x	other (please specif	y): JUL 21 2004
Dusiness trust Actual or Estimated Date of	Incorporation or		rtnership, to be form Month/Year	ed Ca	ayman islands exem	ipted company
Jurisdiction of Incorporation	·	(Enter two-lette	12/03 er U.S. Postal Servic ; FN for other foreig		☐ Estimated tate: FN	FINANCIAL

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, it received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2/97)

1 of 8

<ul> <li>Each beneficial owner having the p of the issuer;</li> </ul>	·	,		
<ul><li>Each executive officer and director</li><li>Each general and managing partner</li></ul>	•	f corporate general and manaç	ging partners of partr	nership issuers; and
Check Box(es) that Apply: 🗵 Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) KSA Capital Management, LLC (the "Inve	stment Manager")			
Business or Residence Address (Numl 89 Headquarters Plaza, North Tower, 3rd	oer and Street, City, State, Floor, Morristown, New J			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Arnott, Robert P.				
Business or Residence Address (Numl c/o KSA Capital Management, LLC, 89 He	ber and Street, City, State, adquarters Plaza, North T		, New Jersey 0796	0
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	■ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Khoshaba, Daniel				
Business or Residence Address (Numl c/o KSA Capital Management, LLC, 89 He	ber and Street, City, State, adquarters Plaza, North T		, New Jersey 0796	0
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	□ Executive Officer	<b>⊠</b> Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Young, Peter M.O.				
Business or Residence Address (Numl c/o KSA Capital Management, LLC, 89 He	per and Street, City, State, adquarters Plaza, North T		, New Jersey 0796	0
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer .	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Numl	per and Street, City, State,	Zip Code)		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	□ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number	ber and Street, City, State,	Zip Code)	programme and the second	

A. BASIC IDENTIFICATION DATA

Each promoter of the issuer, if the issuer has been organized within the past five years;

Enter the information requested for the following:

[4, <b>%</b> ] [4]		en e	al representation	nuseus en B	INFORM	ATION AS	OUT OF	EEDING	Steak Miller	openia actor da la com-		
MATERIAL AND ADDRESS OF THE PARTY OF THE PAR	Toping and the second			ATHERITAL NIGHTON			ogga i governi poseci i filose do 194. d	PERSONAL PROPERTY OF THE		Tolk (March	Catherine Calle	
1.	I. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.								Y€	es No EXI		
2.									\$*	1,000,000		
3.									Y∈			
4.	Enter the info commission offering. If a and/or with a associated pe	or similar i person to state or si ersons of si	remuneration be listed is tates, list the uch a broke	on for soli s an associ ne name d r or dealer	citation of ciated person of the broke	purchasers on or agen er or dealer	in conne t of a brok . If more	ction with er or deale than five (5	sales of sering registered in persons	ecurities in d with the to be listed	the SEC	_
	Name (Last	name first,	if individua	al)								
	applicable. iness or Resi	donos Ada	Irona (Nium	har and C	Stroot City	State 7in	Codo		· ·			
bus	iness or Resi	dence Add	iress (inum	iber and s	street, City,	State, Zip	Code					
Nar	ne of Associa	ited Broker	or Dealer		<del></del>							
Stat	tes in Which I	Person List	ted Has Sc	licited or	Intends to	Solicit Pur	chasers					
	(Check '	'All States"	or check i	ndividual	States)							All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	Name (Last	name first,	if individua	al)		-				3		
Bus	iness or Resi	dence Ado	łress (Num	ber and S	Street, City,	State, Zip	Code)					
Nar	ne of Associa	ited Broker	or Dealer									
Sta	tes in Which I	Person List	ted Has Sc	licited or	Intends to	Solicit Pure	chasers		<del></del>	<del>,</del>		
	(Check '	'All States"	or check i	ndividual	States)						[	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last	name tirst,	it individua	ai)								
Bus	iness or Resi	dence Ado	Iress (Num	ber and S	Street, City,	State, Zip	Code)					
								· · ·				*******
Nar	ne of Associa	ited Broker	or Dealer									
Sta	tes in Which I	Person List	ted Has Sc	licited or	Intends to	Solicit Pur	chasers					
	(Check '	'All States"	or check i	ndividual :	States)							All States
[AL]	`[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		egate g Price		Amount Already Sold
	Debt	\$	<u>0</u>	\$	<u>0</u>
	Equity:	\$	<u>o</u>	\$	<u>0</u>
	□ Common □ Preferred	•			
	Convertible Securities (including warrants):  Partnership Interests		<u>0</u> 0		<u>0</u> 0
	Other (Common Shares, par value \$0.01 (U.S.) per share (the "Shares"))	\$ <u>1,000,</u>	000,000(a)	\$	5,000,0000
	TotalAnswer also in Appendix, Column 4, if filing under ULOE.	Φ <u>1,00</u> 0,	000,000(a)	Þ	<u>5,000,0000</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				A
			nber stors		Aggregate Dollar Amount of Purchases
	Accredited Investors	2	Ī	\$	<u>5,000,000</u>
	Non-accredited Investors	<u>(</u>	<u>)</u>	\$	<u>o</u>
	Total (for filings under Rule 504 only)	<u>N.</u>	<u>'A</u>	\$	<u>N/A</u>
	Answer also in Appendix, Column 3, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.  Type of offering	Typ	e of		Dollar Amount
	Type of offering		urity		Sold
	Rule 505	N		\$	<u>o</u>
	Regulation A			\$	<u>0</u> 0 0
	Rule 504  Total			\$ \$	ō
4.			<u>'A</u>	₩	<u>v</u>
	expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_		_	_
	Transfer Agent's Fees Printing and Engraving Costs	•	X X	\$ \$	<u>0</u> <u>2,500</u>
	Legal Fees	í	X	\$	<u>35,000</u>
	Accounting Fees	I	X	\$	<u>7,500</u>
	Engineering Fees	_	<u>X</u>	\$	<u>0</u>
	Sales Commissions (specify finders' fees separately)		XI XI	\$ \$	<u>0</u> 5,000
	Total	_	X	\$	<u>50,000</u>

<sup>(</sup>a) Open-ended fund; estimated maximum aggregate offering amount.

1 :	Enter the difference between the aggregate offering price given in response to Parand total expenses furnished in response to Part C - Question 4.a. This difference oss proceeds to the issuer."	is the "ad	djusted			\$	999,950,000
for ch	dicate below the amount of the adjusted gross proceeds to the issuer used or proper each of the purposes below. If the amount for any purpose is not known, furnish a eck the box to the left of the estimate. The total of the payments listed must equal pass proceeds to the issuer set forth in response to Part C - Question 4.b above.	an estima	ite and				
			Paymer Office Directo Affilia	rs, rs, &			Payments to Others
	Salaries and fees	X	\$	<u>o</u>	X	\$	<u>0</u>
	Purchase of real estate	X	\$	<u>o</u>	X	\$	<u>0</u>
	Purchase, rental or leasing and installation of machinery and equipment	X	\$	<u>o</u>	X	\$	<u>0</u>
	Construction or leasing of plant buildings and facilities	X	\$	<u>o</u>	X	\$	<u>0</u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	図	\$	<u>o</u>	X	\$	<u>0</u>
	Repayment of indebtedness	X	\$	<u>o</u>	X	\$	<u>0</u>
	Working capital	X	\$	<u>0</u>	X	\$	<u>0</u>
	Other (specify): Portfolio Investments	X	\$	<u>o</u>	X	\$	999,950,000
	Column Totals	X	\$	<u>o</u>	X	\$	999,950,000
	Total Payments Listed (column totals added)	X		\$ <u>99</u>	99,95	0,0	00
	D. FEDERAL SIGNATURE						angang pangangan

Issuer (Print or Type) KSA Capital Fund, Ltd.

Name (Print or Type)

Daniel Khoshaba

Signature

Date

Title of Signer (Print or

Director of the Issuer

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)